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DEPARTMENT OF PUBLIC HEALTH
NOVA SCOTIA

MATERNAL AND CHILD HEALTH

AND

COMMUNICABLE DISEASES

DIVISION

(including Tuberculosis Control)

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MATERNAL AND CHILD HEALTH
AND
COMMUNICABLE DISEASES DIVISION
(Including Tuberculosis)

1974

PART 1

MATERNAL AND CHILD HEALTH

This Division continued to provide consultative services to the eight Health Units as well as to all other agencies involved in the Health Care of Women and Children. These services are provided directly from Central Office as well as through various advisory committees: The Inter-departmental Committee on School Health and the Department of Education Committee on Family Life Education, the Advisory Committee and the subcommittee on Crippled Children of Red Cross Youth, the Medical Advisory Board of the Nova Scotia Branch of the Canadian Rehabilitation Council for the Disabled.

The Director also serves on various Ad Hoc Committees from time to time, and attends national conferences dealing with Maternal and Child Health.

In addition to the consultative services a large amount of the Director's time is concerned with the planning of various programs and projects in co-operation with the Health Unit Directors and the Public Health Nursing Division etc.

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MATERNAL AND PERINATAL MORTALITY STUDIES

A Provincial study committee was set up some years ago under the health grants. Since the grants have been discontinued some hospitals, including the Grace Maternity have set up their own study committees. In 1973 there were 206 infant deaths in the Province with a rate of 15.5 per 1,000 live births. In the preceding year there were 228 deaths and the rate was 16.8. Figures for 1974 are not yet available. During the year 1973 there were no maternal deaths recorded in the Province. This is the first year that there were no maternal deaths. The figure for 1974 is not yet available.

CHILD HEALTH CENTERS

In 1974 Child Health Centers operated in almost 100 localities in the Province. Counselling of parents is done by Public Health Nurses and immunization is carried out by a local doctor or by the Public Health Nurse.

The Director of this Division is directly concerned with the setting up of these centers, providing equipment and advising on the educational materials to be used.

Each center reports to the Director on a monthly basis and the pertinent information is compiled yearly in the central office for publication.

I can see the services of these centers expanding in the future. The Public Health Nurses will carry out many procedures now being done by physicians. In the past three years the nurses have been doing immunizations and this work by the nurses is rapidly increasing. More and more time is now being spent on family planning counselling.

The infant death rate has decreased from 29 per 1,000 live births in 1956 to 15.5 in 1973 which we feel is an indication of the effectiveness of such programs. The figure for 1974 is not yet available.

The Public Health Nurse can carry out such procedures as immunization as well as physicians and this is a great saving to the community but more important, it is a means of obtaining better immunization Coverage of the population and better records of immunization.

EDUCATION FOR CHILDBIRTH

This program is carried on in two ways: (1) organized classes and (2) prenatal visiting in the homes by the Public Health Nurses.

Teaching in the homes has been going on for many years but the content of this teaching has been more and more organized since the Maternal and Child Health Division was set up in 1953. Prenatal classes began first at the Grace Maternity Hospital in Halifax many years ago and has expanded according to public demand until at the present time classes are being held in every Health Unit in the Province. In 1974, 1,919 women attended prenatal classes.

In 1974 two thousand five hundred and ninety-five mothers were visited in their homes during the prenatal period.

A guide for nurses to use in their teaching was drawn up by this Division and this is revised from time to time. This Division also supplies necessary equipment such as films, film strips, etc. In return the Division requires regular reporting of the activities of each class.

Family planning information is now being given in these classes and in the home visiting. The demand for this type of information is increasing.

Information on family planning is also being given in the Child Health Centers. In 1973, 87.5% of all live births in the Province were visited at least once by the Public Health Nurse.

FAMILY PLANNING

A Family Planning Clinic was established at the Grace Maternity Hospital some years ago and attendance has increased at this clinic each year. Also a family clinic has been operating in North Preston for a number of years and about seventy-five per cent of the work of this clinic is concerned with family planning.

More recently the Family Planning Association of Nova Scotia was organized and this association offers a family planning counselling service at the Halifax North End Community Center. In February, 1974 Family Planning Clinic services were made available at this center and now contracep -tive medications and I.U.D.'s are inserted.

Those who require sterilization are referred to the Grace Maternity Clinic for these services. Our Public Health Nurses help staff the evening classes.

The Director has been active on the Interdepartmental Committee on School Health and also on the Committee on Family Life Education. In the high schools the home economics classes are getting instruction on family life including sex education. In Halifax City several classes of boys are taking home economics.

HAEMOLYTIC DISEASES OF THE NEWBORN

This Division has been involved in supporting financially a program for the care of haemolytic disease of the newborn child which is sponsored by the Medical Society of Nova Scotia and directed by Dr. Robert Grant, Paediatrician.

An RH Committee has been formed and it meets weekly to consider problem pregnancy cases of foetal-maternal incompatability. These cases are referred by private practitioners thoughout the Province. The Committee offers specific advice on the management of these cases. Amniotic taps are done to determine the severity of haemolytic disease and intra-uterine transfusions are carried out early in pregnancy in an effort to bring severely affected foetuses as near as possible to term before delivery.

The Committee carries on an educational program in an attempt to educate the doctors of the Province and the public. The need for RH testing on the first visit of the prenatal to her doctor is emphasized and also all RH negative pregnancies should be referred to an RH center for management.

INFANT VISITING PROGRAM

A very comprehensive program of infant visiting is carried out by the Public Health Nurses. All infants are visited as soon as possible after they go home from hospital. Further visits are done on a selective basis according to the individual family needs as determined by the nurse. During the year 1974 there were 11,198 infants visited which is over 90% of all live births in the Province. Eighty per cent were visited during the first month of life and 2,595 of the mothers were visited prenatally by the Public Health Nurse.

ACCIDENT PREVENTION

Accidents continue to be a major cause of death in childhood. Motor vehicle accidents, drowning and fire are among the most important types of accidents. Perhaps as important as the deaths is the large number of injuries most of which occur in and around the home.

In Nova Scotia many organizations both official and voluntary are involved in the accident prevention program. The Public Health Nurses do a great deal of teaching about accident prevention in their home visiting program and in the schools. The Department of Highways, the Department of Education, the Department of Agriculture, the Red Cross Society, the National Safety Council, the St. John Ambulance, the R.C.M.P. and the Nova Scotia Accident Prevention Association are some of the other agencies involved. Table 25 shows the highway accidents for the year 1974.

The Poison Control Center at the Izaak Walton Killam Hospital for Children continued to operate through 1974. Reports of all poisonings are sent to the Public Health Nurse concerned and she makes a home visit and takes advantage of this opportunity to do some teaching about accident prevention in general. Statistics on accidents will be found in the statistical part of this report: tables 25, 26, 27 and 28.

SCHOOL HEALTH

The school health program is carried out largely by the Public Health Nurses as part of their generalized program.

Hearing and Vision Testing are carried out routinely in primary and grade six. Other pupils are tested if they are referred by teachers or parents. Table 29 gives a summary of the testing done and the results. Tuberculin testing is carried out in grades primary and in other grades as necessary.

A great deal of counselling is also done by the Public Health Nurses in the schools.

The Public Health Nutritionists do a great deal of work in the schools in carrying out workshops with the teachers and in promoting good school lunch programs.

Public Health Nutritionists continued to encourage nutrition projects in Health teaching during meetings with groups of teachers and individual teachers in schools across the province. Some nutrition counselling was done with individual students and groups regarding control of weight and poor eating habits. Consultative services continued with regard to school cafeterias. Several plans were enlarged, a few new ones started and many meetings were held with various school authorities to develop new programs.

Dental Hygienists with educational training carry out a program of instruction for school children and teachers. They do this in conjunction with the program of inspection, prophylaxis and topical fluoride application. Further details of the dental health program in the schools are to be found in the report of the Dental Division.

CRIPPLED CHILDREN

The Maternal and Child Health Division works closely with the Canadian Rehabilitation Council for the Disabled, Nova Scotia Branch. Remuneration for doctors in the travelling diagnostic clinics for children is now under M.S.I. The Director of this Division continued to serve on the Professional Advisory Board of the Council in 1974.

Our Public Health Nurses play a most important role in this program, in case finding, the clinics and the follow-up of patients.

CANCER DETECTION PROGRAM

The report shows no significant reduction in the incidence of invasive carcinoma of the cervix during 1973. The death rate has dropped to 27 from 42 the year before and it looks as if the year 1972 was atypical.

Death from malignancy of other parts of the uterus remain very few.

We have analyzed the cases of carcinoma of the cervix - invasive- which were newly registered in 1973, with regard to their previous cytology findings. It was very difficult because there is no central cytology registry but a search related the list of invasive cases to all the laboratories which have ever provided a cytology service in Nova Scotia. By compiling the reports from all these laboratories, we were able to show that of the 63 invasive carcinoma of the cervix cases, only 17 had cytology prior to the episode which lead to the admission to hospital with the disease. Of the 17 who had previous cytology, only 4 had recent cytology, that is in 1972, and all these reports were suspicious or positive and presumably lead to diagnosis and treatment early in 1973. Of the other 13 cases with previous cytology, only 2 had had cytology since 1970.

Although there is some possibility of error when information is gathered from a number of sources, it seems to be very clear that almost without exception the new cases of carcinoma of the cervix we see in Nova Scotia have not previously had cytology or have not had cytology recently.

It seems quite clear that cytology screening does in fact bring out potential cases of carcinoma of the cervix and that by and large, the invasive cases which are seen have not previously, at least not recently, been screened by cytology. This points to the continuing need to reach, by screening, those women who are not regularly having pap smears. Additional educational work seems to be necessary to identify and screen the hard to get at group. Doctors should inform patients when a pap smear is taken and ask the patient to tell others about this procedure. We must participate in every possible way with lay-education programs. Education by the nursing profession and the Canadian Cancer Society is also exceedingly important. We can be certain that all patients admitted to hospital are screened where appropriate.

During the last year we have seen again some cases where it is difficult to explain the policies which some physicians practice.

CASE 1: A woman in her early twenties was admitted with advanced invasive carcinoma of the cervix having had symptoms for a year. She had had three children but a pap smear some months previously was reported as nonmalignant. Treatment was therefore delayed. In retrospect, it is clear that this patient had invasive disease at the time of the pap smear but the technique of obtaining the specimen placed only debris from the already involved cervix on a slide and this was probably associated with some cells. Consequently, a false negative reading given. WHEN CLINICAL SUSPICION OF CARCINOMA IS PRESENT, A TISSUE BIOPSY IS WARRANTED EVEN THOUGH THE PAP SMEAR IS REPORTED NEGATIVE.

CASE 11: A woman in her early forties was admitted for the treatment of invasive disease. She had had 13 children, that last three years and until the present symptoms developed, had never had a pelvic examination except at the time of delivery. There is no record in any of the laboratories of her ever having had a Papanicolaou smear, despite the fact that she had four children born during the past ten years.

Each year we see several cases of residual carcinoma of the cervix in patients who have recently had hysterectomies carried out without previously eliminating carcinoma of the cervix from the diagnosis. A hysterectomy is not satisfactory treatment for invasive carcinoma of the cervix and no hysterectomy should ever be done without ruling out this disease. These cases require radiation therapy or occasionally Werthein hysterectomy.

A booklet on cytology was prepared and distributed several years ago. Additional copies are still available through this office.

It is clear that we need to make a greater effort to reach the unscreened member of the population. This can be done both through doctor's office practice and through their contact in the community. The people at maximum risk very often do not come to the physician.

TABLE 1

CARCINOMA OF THE CERVIX

NOVA SOCTIA - 1973

YEAR	TOTAL CA CX	INVASIVE CASES	INCIDENCE per 100,000 FEMALES ALL AGES	*INCIDENCE per 100,000 WOMEN 20+	STAGE 0	NUMBER OF PAP SMEARS
1971	287	67	16.7	33.5	220	97,607
1972	320	65	16.0	33.5	255	99,566
1973	236	63	16	32	173	103,280

* Refers to Invasive Cases ONLY

TABLE 2

NOVA SCOTIA

DISTRIBUTION OF CARCINOMA OF THE CERVIX

BY STAGE OF DISEASE - 1973 REPORT

YEAR	STAGE % OF TOTAL					TOTAL NUMBER
	4	3	2	1	0	
1971	1.7	2.7	10.3	8.0	76.6	*287
1972	1.2	2.1	7.1	8.7	79.0	*320
1973	0.4	6.7	7.6	11.8	73.3	*236

* Includes Stage 0 Cases

1973 CASES

4	3	2	1	0	
1	16	18	28	173	236

TABLE 3

CUMULATIVE TOTAL SINCE START OF

CYTOLOGY PROGRAM - 1961

CA CERVIS - INVASIVE	1,080
STAGE 0	1,958
CYTOLOGICAL EXAMINATIONS	721,400

TABLE 4

PRINCIPLE SITES - CANCER IN FEMALES

NOVA SCOTIA - 1972 - 1973

	1972	1973
PELVIC - Cervix Stage 0	255	173
Cervix Invasive	65	63
Endometrium	48	49
Ovary	30	38
Vulva	6	3
Vagina	-	4
Fallopian Tube	-	1
Vag. Vault	-	-
Miscellaneous	1	-
BREAST	235	*196
TOTAL PELVIC & BREAST	740	527

* Not complete figures

TABLE 5

MEAN AGE - CARCINOMA OF THE CERVIX

NOVA SCOTIA - 1973 REPORT

	1971	1972	1973
INVASIVE	51.0	51.0	53
STAGE 0	38.1	35.0	37.3

TABLE 6

NOVA SCOTIA

DEATHS FROM CARCINOMA OF THE CERVIX

YEAR	CERVIX	UTERUS - OTHER PARTS
1961	40	18
1962	37	18
1963	41	17
1963	32	17
1965	32	16
1966	53	13
1967	40	10
1968	28	6
1969	48	17
1970	22	9
1971	29	14
1972	42	9
1973	27	8

TABLE 7

FEMALE GENITAL CANCER DEATHS 1973

NOVA SCOTIA

OVARY	28
UTERUS	4
PELVIS	2
VULVA	3
CERVIX	27
ENDOMETRIUM	2

TABLE 8

NOVA SCOTIA - 1973 REPORT

	1971	1972	1973
Aberdeen Hospital, New Glasgow, N.S.	3,623	3,510	4,238
Blanchard Fraser Memorial, Kentville, N.S.	4,333	4,997	5,139
Colchester Co. Hospital, Truro, N.S.	5,304	5,002	5,200
Dawson Memorial Hospital, Bridgewater, N.S.	3,428	3,658	4,200
Halifax Infirmary, Halifax, N.S.	11,793	12,852	15,819
St. Elizabeth Hospital, North Sydney, N.S.	1,793	1,817	2,070
St. Martha Hospital, Antigonish, N.S.	5,199	4,029	3,431
St. Rita Hospital, Sydney, N.S.	4,540	792	51
Yarmouth Regional Hospital, Yarmouth, N.S.	3,136	2,982	2,729
	42,983	39,639	42,877
Pathology Institute, Halifax Cytology Laboratory	54,624	59,927	60,403
	97,607	99,566	103,280

TABLE 9

LIVE BIRTHS & RATES
NOVA SCOTIA & CANADA

1960 - 1974

YEAR	NOVA SCOTIA		CANADA	
	NUMBER	RATE	NUMBER	RATE
1960	19,126	26.0	478,551	26.9
1961	19,382	26.3	476,274	26.1
1962	19,432	26.0	469,693	25.3
1963	18,976	25.1	265,767	24.6
1964	18,313	24.1	452,915	23.5
1965	16,524	21.9	418,595	21.4
1966	15,220	20.1	387,710	19.4
1967	14,312	18.8	370,894	18.2
1968	13,774	18.0	364,310	17.6
1969	13,755	18.0	371,365	17.6
1970	14,159	18.4	371,988	17.4
1971	14,250	18.1	362,187	16.8
1972	13,536	17.0	347,319	15.9
1973	13,289	16.6	343,373	15.5
1974	Figures not available			

These figures are obtained from the Division of Vital Statistics, Department of Public Health. The number of live births for Nova Scotia may be slightly different from the number reported by the Health Unit Directors.

TABLE 10

LIVE BIRTHS, STILLBIRTHS, INFANT DEATHS, MATERNAL DEATHS & RATES
IN NOVA SCOTIA

1960 - 1974

YEAR	LIVE BIRTHS		STILLBIRTHS		INFANT DEATHS		MATERNAL DEATHS	
	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE
1960	19,126	26.0	322*	16.8	565	29.5	4	0.2
1961	19,382	26.3	344*	17.7	538	27.7	4	0.2
1962	19,432	26.0	340*	17.5	614	30.6	9	0.4
1963	18,976	25.1	305*	16.1	513	27.0	2	0.1
1964	18,313	24.1	319*	17.4	464	25.3	9	0.5
1965	16,524	22.2	245*	14.8	394	23.8	9	0.5
1966	15,220	20.1	256*	16.8	384	25.2	2	0.1
1967	14,312	18.8	239*	16.7	326	22.8	3	0.2
1968	13,774	18.0	191*	13.9	296	21.5	6	0.4
1969	13,618	17.8	217*	15.9	267	19.6	1	0.07
1970	14,159	18.4	198*	14.0	245	17.3	2	0.1
1971	14,250	18.1	172*	12.1	265	18.6	7	0.5
1972	13,536	17.0	141*	10.4	228	16.8	1	0.07
1973	13,289	16.6	141	10.6	206	15.5	0	0
1974	Figures not avilable							

*Stillbirths 20 weeks gestation. These figures are obtained from the Division of Vital Statistics, Department of Public Health.

TABLE 11

INFANT DEATHS, NEONATAL DEATHS, EARLY NEONATAL DEATHS & RATES* - NOVA SCOTIA - 1960 - 1974

YEAR	INFANT DEATHS		NEONATAL DEATHS **		EARLY NEONATAL DEATHS	
	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE
1960	568	29.5	366	19.1	300	15.6
1961	538	27.7	327	16.9	280	14.4
1962	614	31.6	380	19.5	339	17.4
1963	513	27.0	316	16.7	281	14.8
1964	464	25.3	305	16.7	273	14.9
1965	394	23.8	262	15.9	237	14.9
1966	384	25.2	256	19.8	219	14.4
1967	326	22.8	231	16.1	210	14.7
1968	296	21.5	193	14.0	178	12.9
1969	267	19.6	188	13.8	159	11.7
1970	245	17.4	180	12.7	155	10.9
1971	265	18.6	180	12.6	148	10.4
1972	228	16.8	129	9.5	100	7.4
1973	206	15.5	135	10.2	107	8.1
1974	Figures not available					

*All figures based on 1,000 live births.

**Neonatal deaths are deaths in the first 28 days.
Infant deaths are deaths in the first year.
Early neonatal deaths are deaths in the first 7 days.

TABLE 12

CAUSES OF MATERNAL DEATHS IN NOVA SCOTIA 1970 - 1974

CAUSES OF DEATHS	NUMBER OF DEATHS				
	1970	1971	1972	1973	1974
Toxaemias of Pregnancy and Puerperium	0	4	0	0	Figures not available
Sepsis of Pregnancy, Childbirth and puerperium	1	1	1	0	
Haemorrhage of Pregnancy & Childbirth	0	0	0	0	
Other Causes	0	2	0	0	
Other & Unspecified Abortion	1	0	0	0	
TOTAL	2	7	1	0	

TABLE 13

CAUSES OF STILLBIRTHS IN NOVA SCOTIA

(20 + weeks gestation)

	1973	1974
Chronic Circulatory and Genito-urinary disease of mother	2	
Other Maternal Conditions unrelated to Pregnancy	3	
Toxemias of Pregnancy	4	
Maternal Ante and Intrapartum infection	0	
Difficult Labour with abnormality of bones, organs or tissues of pelvis	1	
Difficult Labour with disproportion	-	
Difficult Labour with Malposition of foetus	2	
Difficult Labour with Abnormality of forces of labour	-	Figures not available
Difficult labour with unspecified complications	1	
Other Complications of Pregnancy and Childbirth	5	
Conditions of Placenta	45	
Conditions of Umbilical Cord	13	
Birth Injury without mention of cause	3	
Haemolytic Disease of Newborn	4	
Anoxic and Hypoxic Conditions not elsewhere classified	11	
Other Conditions of Foetus and newborn	26	
Congenital Anomalies	21	
Infections of Foetus and newborn	0	
Other Diseases of Foetus and newborn	0	
TOTAL	141	

TABLE 14

CAUSES OF EARLY NEONATAL DEATHS IN NOVA SCOTIA

1970 to 1974

CAUSES OF EARLY NEONATAL DEATHS	NUMBER OF DEATHS				
	1970	1971	1972	1973	1974
Immaturity	31	27	18	18	Figures not available
Anoxia & Hypoxia	61	58	39	43	
Birth Injury	3	8	2	0	
Congenital Anomalies	28	30	29	20	
Other Causes	32	25	12	16	
TOTAL	155	148	100	107	

TABLE 15

CAUSES OF INFANT DEATHS AND NEONATAL DEATHS

NOVA SCOTIA

1974

	*NEONATAL DEATHS	**INFANT DEATHS
Infective and Parasitic Diseases		
Neoplasms-Malignant		
Allergic, Endocrine & Metabolic Diseases		
Blood Diseases		
Mental Disorder		
Diseases of Nervous System & Sense Organs		
Diseases of Circulatory System		
Diseases of Respiratory System		
Diseases of Digestive System		
Diseases of Genito-urinary System		
Diseases of Skin and Subcutaneous tissue		
Diseases of the Musculokeletal System		
Congenital Anomalies		
Certain Causes of Perinatal Mortality		
Symptoms and Ill defined conditions		
Accidents, poisonings and violence		
TOTAL		

Figures not available

* A neonatal death is a death in the first 28 days.

** An infant death is a death in the first year.

TABLE 16

MORTALITY IN NOVA SCOTIA FOR FIVE YEAR PERIOD 1970 to 1974

CAUSES OF DEATHS	NUMBER OF DEATHS				
	1970	1971	1972	1973	1974
Diseases of Circulatory System	3,431	3,466	3,599	3,502	Figures not available
Cancer (Neoplasma)	1,342	1,274	1,359	1,395	
Stillbirths* & Infant Deaths	443	437	369	347	
Infant Deaths	245	265	228	206	
Stillbirths*	198	172	141	141	
Violence, Accidents & Poisonings	560	584	591	655	

* Stillbirths - 20 + weeks gestation

TABLE 17

NUMBER OF LIVE BIRTHS, STILLBIRTHS, INFANT DEATHS AND NEONATAL DEATHS WITH RATES BY HEALTH UNITS

1974

HEALTH UNIT	TOTAL LIVE BIRTHS	STILLBIRTHS	INFANT DEATHS	NEONATAL DEATHS	STILLBIRTHS RATE	INFANT DEATH RATE	NEONATAL DEATH RATE
Atlantic	3,723	26	58	40	.6	1.5	1
C.B. South	1,412	12	8	8	8.5	5	5
C.B. North	1,196	5	6	5	4.1	5.0	4.1
Cobequid	1,117	13	10	8	11.6	8.9	7.2
Fundy	1,486	8	18	8	5.3	12.1	5.3
Lunenburg-Queens	751	7	14	11	9.3	18.6	14.6
Northumberland	1,423	19	14	10	13.4	9.8	7
Western	938	16	19	16	17.05	20.25	17.05
TOTAL	12,046	106	147	106	.88	1.2	.88

Please note that the number of live births reported by the Health Units is slightly different from the number reported by the Division of Vital Statistics. This could be due to various reasons. For example, a few births might be reported to Vital Statistics which would not be received in time for publication in the report of the Health Units.

TABLE 18

PARITY OF MOTHERS WHO ATTENDED PRENATAL CLASSES

1974

	NUMBER PRIMIPARA	NUMBER MULTIPARA	INFORMATION INCOMPLETE	TOTAL
Berwick	14	1	-	15
Middleton	48	5	5	58
Kentville	56	8	7	71
Greenwood	4	0	1	5
Windsor	36	8	0	44
Wolfville	24	1	5	30
Annapolis	2	0	1	3
Woodlawn	14	3	0	17
Bedford	52	11	4	67
Dartmouth Medical Centre	95	25	2	122
Sydney City Hospital	30	2	2	34
Baddeck	4	1	2	7
St. Rita's Hospital, Sydney	60	6	0	66
Grace Haven Home	13	0	6	19
St. Elizabeth Hospital	14	4	0	18
Antigonish	54	13	0	67
Pictou	25	9	0	34
New Glasgown	73	17	1	91
Yarmouth Hospital	17	2	0	19
West Publico	7	4	1	12
Barrington High School	7	4	0	11
Digby Hospital	17	4	1	22
Shelburne	10	5	0	15
Meteghan	7	2	0	9
M.W. Pubnico School	7	4	1	12
Kemptville	3	1	0	4
Bridgewater	57	12	3	72
Liverpool	16	6	0	22
Lunenburg	19	1	3	23
Chester	27	6	5	38
Colchester Hospital	100	21	11	132
Highland View Hospital	42	9	6	57
Lillian Fraser, Tatamagouche	2	1	0	3

TABLE 18 CON'D

	NUMBER PRIMIPARA	NUMBER MULTIPARA	INFORMATION INCOMPLETE	TOTAL
Grace Maternity Hospital	541	108	2	651
Glace Bay	23	9	0	32
Port Hood	2	6	0	8
New Waterford	5	0	4	9
TOTAL	1,527	319	73	1,919

TABLE 19

NUMBER OF CLASSES ATTENDED - 1974

	Number of Classes						TOTAL
	1	2	3	4	5	6 or more	
Grace Maternity	70	92	100	157	193	42	654
C.B. South	9	3	19	18	0	0	49
Cobequid	17	20	22	29	51	56	195
Fundy	18	37	43	79	46	1	224
Lunenburg-Queens	21	28	25	47	32	0	153
Western	22	11	5	15	21	18	92
C.B. North	20	23	48	52	0	0	143
Northumberland	32	17	27	44	57	16	192
Atlantic	32	21	40	61	45	0	199
TOTAL	241	252	329	502	445	133	1,901
% of TOTAL	12.7	13.3	17.3	26.4	23.4	7.0	

TABLE 20

MONTH OF PREGNANCY MOTHER BEGAN CLASES - 1974

	1	2	3	4	5	6	7	8	9	Information Incomplete	TOTAL
Grace Maternity	0	0	5	3	9	2	20	33	16	575	663
C.B. South	0	0	4	3	8	7	12	8	2	5	49
Western	0	6	8	14	14	12	10	9	4	15	92
C.B. North	0	2	8	24	17	19	30	24	7	13	144
Cobequid	0	13	26	36	23	29	32	10	1	26	196
Atlantic	1	1	11	23	28	48	46	23	4	19	204
Northumberland	1	7	13	34	35	28	32	13	4	25	192
Lun-Queens	0	5	16	22	27	24	20	11	3	25	153
Fundy	0	1	10	24	25	24	17	20	2	103	226
TOTAL	2	35	101	183	186	193	219	151	43	806	1,919
% OF TOTAL	.1	1.8	5.0	9.6	9.7	10.1	11.5	7.9	2.3	42.0	1.000

TABLE 21

INFANT VISITING AND PRENATAL VISITING PROGRAM BY HEALTH UNITS

1974

HEALTH UNIT	NUMBER OF BIRTHS REPORTED DURING 1974	BEFORE 1 MONTH	BEFORE 2 MONTHS	BEFORE 3 MONTHS	BETWEEN 3 MONTHS & 1 YEAR	TOTAL NUMBER OF INFANTS VISITED	NUMBER OF MOTHERS WHO RECEIVED PRENATAL VISITS
Atlantic	3,723	2,520	587	88	33	3,229	349
C.B. North	1,196	1,044	90	0	1	1,128	189
C.B. South	1,412	942	384	33	1	1,360	200
Cobequid	1,117	1,043	28	3	8	1,082	447
Fundy	1,486	1,362	28	0	3	1,393	385
Lunenburg-Queens	751	669	29	8	4	710	384
Northumberland	1,423	1,297	79	6	1	1,383	315
Western	938	761	116	11	5	893	326
TOTAL	12,046	9,638	1,341	149	56	11,178	2,595

TABLE 22

PERCENT OF INFANTS VISITED BY HEALTH UNITS

1974

Health Unit	NUMBER OF BIRTHS REPORTED DURING 1974	BEFORE 1 MONTH	BEFORE 2 MONTHS	BEFORE 3 MONTHS	BETWEEN 3 MONTHS & 1 YEAR	% OF INFANTS VISITED	% WHO RECEIVED PRENATAL VISITS
Atlantic	3,723	67.7	15.76	23.6	.8	86.7	9.3
C.B. North	1,196	87.3	7.5	0	.08	94.3	15
C.B. South	1,412	66.7	27	.02	.07	96.3	14
Cobequid	1,117	93.4	.02	.26	.72	96.8	40.0
Fundy	1,486	91.7	1.8	0	.20	93.7	25.9
Lunenburg-Queens	751	89.0	3.8	1.0	.53	94.5	51.1
Northumberland	1,423	91.1	5.5	.42	.07	97.1	22.1
Western	938	81.1	12.3	1.2	.53	95.2	34.7
TOTAL	12,046	80.0	11.1	1.2	.46	92.8	21.5

TABLE 23

PERCENT OF INFANTS VISITED IN NOVA SCOTIA
BY THE PUBLIC HEALTH NURSES
FOR THE SIX YEAR PERIOD 1969 - 1974

YEAR	NUMBER OF BIRTHS REPORTED	VISITED BEFORE I MONTH	VISITED BEFORE 2 MONTHS	VISITED BEFORE 3 MONTHS	VISITED BETWEEN 3 MONTHS & I YEAR	% OF INFANTS VISITED	% WHO RECEIVED PRENATAL VISITS
1969	13,129	69.7	15.9	3.6	.7	90.1	27.1
1970	13,697	73.8	12.8	1.4	.4	88.5	23.6
1971	14,563	75.7	12.4	1.2	.2	89.7	24.0
1972	13,470	74.7	11.1	1.1	.6	87.5	29.8
1973	12,581	77.02	10.3	1.6	.81	89.7	21.44
1974	12,046	80.0	11.1	1.2	.46	92.8	21.5

TABLE 24

SUMMARY OF CHILD HEALTH CONFERENCES

1974

HEALTH UNIT	UNDER 1 MONTH		1 - 2 MONTHS		3 - 11 MONTHS		1 - 5 YEARS		TOTAL	
	C	E	C	E	C	E	C	E	C	E
Atlantic	2	2	9	8	122	99	427	354	560	463
C.B. North	0	0	0	0	201	207	257	0	458	207
C.B. South	0	0	6	0	343	0	167	0	516	0
Cobequid	25	17	198	2	204	18	298	54	725	91
Lunenburg-Queens	1	1	12	14	180	1	246	0	439	16
Northumberland	26	0	53	3	350	15	301	7	730	25
Western	7	3	37	12	227	89	202	84	473	188
Fundy	No longer has Child Health Conferences									
TOTAL	61	23	315	39	1,627	429	1,898	499	3,901	990

C - Means Conference by Public Health Nurse

E - Means Examined by a Doctor

TABLE 25

MOTOR VEHICLE ACCIDENTS
JANUARY - DECEMBER, 1974

NATURE OF INJURIES	FATAL	NON-FATAL	TOTAL
1) Fractured skull	14	24	38
2) Fractured spine	0	1	1
3) Other fracture	0	60	60
4) Concussion of brain	0	31	31
5) General shock with bruises and cuts	1	1,775	1,776
6) Slight shock & shake-up	0	76	76
7) Internal injuries	249	190	439
8) Other injuries - sprains, dislocations, wrenches, etc.	4	1,998	1,998
TOTALS	268	4,155	4,423

TABLE 26

JANUARY - DECEMBER - 1974

CLASSIFICATION	AGE GROUPS OF VICTIMS									FATAL
	Under 5 yrs.	5 - 14 yrs.	15-19 yrs.	20-24 yrs.	25-34 yrs.	35-44 yrs.	45-54 yrs.	55-64 yrs.	65 yrs. & over	not stated
Driver	-	2	15	28	24	7	8	10	12	-
Passenger	3	10	23	23	14	-	4	4	5	-
Pedestrian	3	13	8	1	4	3	2	6	15	-
Bicyclist	-	5	1	-	-	-	-	-	1	-
Motorcyclist	-	-	2	6	1	1	1	-	-	-
Other	-	-	-	-	-	-	-	-	-	-
Passenger on Motorcycle	-	1	1	1	-	-	-	-	-	-

CLASSIFICATION	AGE GROUPS OF VICTIMS									INJURED
	Under 5 yrs.	5 - 14 yrs.	15-19 yrs.	20-24 yrs.	25-34 yrs.	35-44 yrs.	45-54 yrs.	55-64 yrs.	65 yrs. & over	not stated
Driver	-	2	293	392	450	229	157	133	59	9
Passenger	47	135	336	281	143	78	79	74	63	317
Pedestrian	51	206	57	14	20	9	18	14	33	79
Bicyclist	1	89	29	7	2	-	-	1	-	28
Motorcyclist	-	2	85	62	22	4	1	1	-	5
Other	-	-	1	1	-	-	-	-	-	4
Passenger on Motorcycle	-	2	14	10	-	-	-	1	-	5

TABLE 27

POISON CONTROL CENTRE
CASES BY AGE GROUPS
1974

AGE GROUPS

AGE	MALE	FEMALE	TOTAL
Less than 1 year	7	6	13
1 year	72	50	122
2 years	107	72	179
3 years	33	31	64
4 years	4	16	20
5 - 9 years	16	9	25
10 - 14 years	30	64	94
	269	248	517

TABLE 28

POISONINGS I.W.K. HOSPITAL

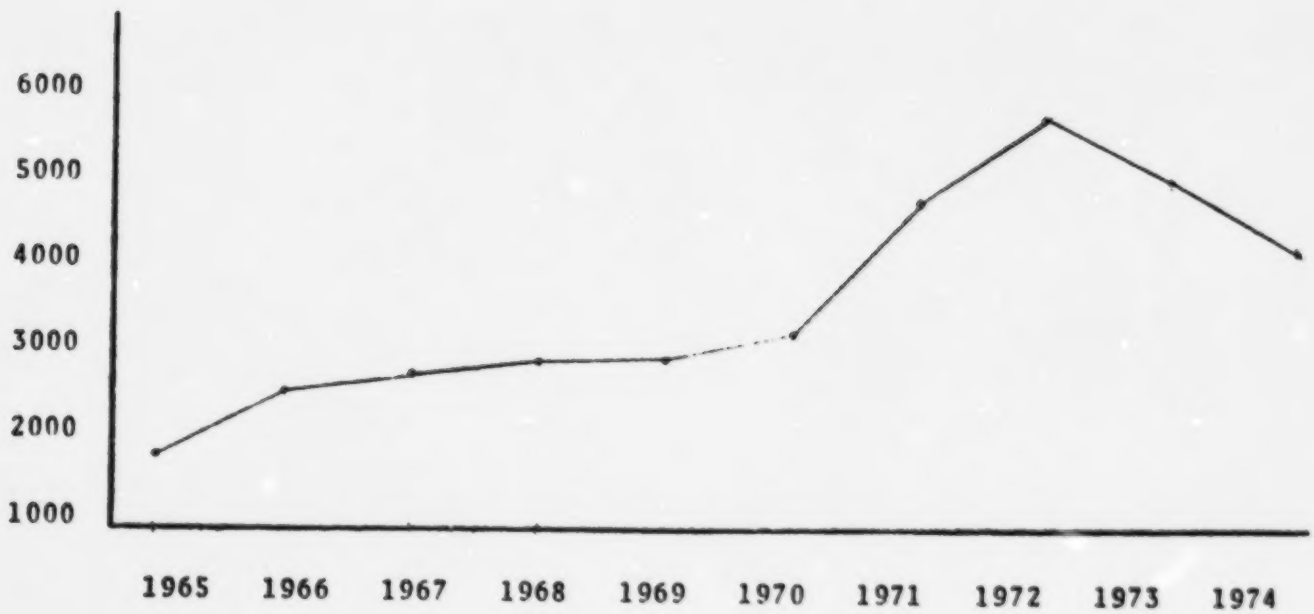
1968 - 1974

	1968	1969	1970	1971	1972	1973	1974
Deaths in I.W.K. Hospital	0	0	0	0	2	0	0
Number of Telephone calls	2878	2958	3354	4859	5896	5090	4313
Telephone consultations only	1932	2017	2576	4214	5312	4576	3796
Telephone calls from doctors	132	162	246	254	335	429	194
Telephone calls from hospitals etc.	96	101	106	122	146	258	208
Children brought to Hospital	946	941	778	645	584	514	517
(a) from Halifax	219	407	314	299	249	219	217
(b) from Dartmouth	301	335	245	185	175	128	118
(c) from Hfx. Co.	406	186	198	133	129	128	143
(d) from other areas	20	13	21	28	31	39	39
Treatments given in Hospitals							
Gastric lavages	379	295	152	80	58	46	48
Syrup of Ipecac	185	234	286	314	260	216	186
Chest x-rays	290	266	213	231	215	174	117
Admissions	201	194	166	124	103	72	89
Hospital Days	519	390	396	244	217	191	357
Ingestants							
A.S.A. (Aspirin TM)	315	346	268	166	115	98	78 (42
Tranquilizers & Sedatives	37	55	76	72	72	42	42
Other medications	146	121	106	142	131	120	118
Hydrocarbons (e.g. stove oil)	202	212	191	113	110	94	80

*Adult Sized (5 grains) ASA

I.W.K. Hospital for Children
Halifax, N.S.

POISON CONTROL CENTRE
NUMBER OF TELEPHONE CALLS



I.W.K. Hospital for Children
Halifax, N.S.

ADMISSIONS TO HOSPITAL FOR CHILDHOOD POISONING

TABLE 29

AUDIOMETRIC & VISION TESTING
NOVA SCOTIA PUBLIC SCHOOLS 1974

	ATLANTIC	C.B. NORTH	C.B. SOUTH	COBEQUID	FUNDY	LUN-QUEENS	WESTERN	NORTHUMBERLAND	TOTAL
SCREENING TEST:									
No. Tested	17,559	5,524	6,296	4,176	5,458	3,976	3,767	5,901	52,657
No. Failed	967	117	95	261	447	167	130	423	2,607
RE-CHECK TEST:									
No. tested	757	264	150	173	519	245	114	405	2,627
No. failed	470	83	83	67	208	100	38	142	1,191
No. Rec'd Medical Attention	708	84	81	50	99	26	36	113	1,197
TYPES OF TREATMENT REQUIRED									
Ear Infection	87	15	88	19	40	10	11	7	277
Wax in Canal	123	27	14	19	17	4	6	6	216
Hearing Aid	0	8	7	2	6	2	3	7	35
Other (Specify)	96	3	0	0	38	3	8	21	169
No Treatment Required	51	0	0	3	4	0	1	6	65
VISION									
No. Tested	16,920	4,369	6,430	4,203	6,177	4,123	4,492	5,776	52,490
No. Failed	1,517	456	656	340	321	273	538	533	4,684
Wearing Glasses at Testing	1,495	491	573	568	464	374	506	530	5,001
Failed test with Glasses	353	74	118	80	58	45	103	80	911
No. Rec'd Medical Attention	682	168	353	309	229	156	307	339	2,543
No Medical Attention required	101	31	47	30	27	9	45	39	324

PART 11

COMMUNICABLE DISEASE CONTROL

TUBERCULOSIS

During the year 1974 the Tuberculosis Control Services remained essentially the same as in the previous year.

These consisted of:

1. The Central Tuberculosis Index
2. Treatment facilities
3. Field Services
4. Voluntary Assistance by the Nova Scotia Tuberculosis and Respiratory Disease Association.

CENTRAL TUBERCULOSIS INDEX

The Central Index is located at the Central Office in Halifax and is under the very capable direction of Mr. Harris Naugler, Division of Registration Services.

This Index is compiled from information fed to it from the eight Health Unit Directors, the Provincial Laboratory, the Pathologists throughout the Province, the Tuberculosis treatment facilities, the Nova Scotia Hospital Insurance Commission and the Division of Registration Services of the Deputy Registrar General. Each month the Index sends out a statistical report to some forty interested agencies including the Health Unit Directors. It is the center from which information is obtained from all Health Units in Nova Scotia and from other Provinces and other Countries to facilitate the follow-up of cases and contacts of tuberculosis.

TREATMENT FACILITIES

The treatment Facilities are located at the Nova Scotia Sanatorium in Kentville (120 beds), Point Edward Hospital, Sydney (15 beds), and the tuberculosis ward of the Nova Scotia Hospital (20 beds). At year end there were 155 beds in the Province available for the treatment of tuberculosis and 103 or 66% were occupied. Last year 62% of the beds were occupied.

At year end 46 of the 120 Nova Scotia Sanitorium beds were occupied by non-tuberculosis patients and 43 were occupied by tuberculosis patients.

FIELD SERVICES

The field services are provided by the eight Health Unit Directors' and their staffs. These services consist of:

1. The maintenance of a Health Unit tuberculosis case register in which is kept a record of all known cases in the Health Unit.
2. The supervision of all cases undergoing treatment at home.
3. The investigation and follow-up of all known contacts of each case of tuberculosis active and inactive.
4. The operation of chest clinics at points throughout the Province convenient to the public at regular times.

The Nova Scotia Tuberculosis and Respiratory Disease Association continued to operate its clinic one full day per week at Fairview, Nova Scotia. This clinic operates under the direction of the Director of the Atlantic Health Unit.

TUBERCULOSIS DEATHS

During the year 1974 there were 7 deaths from tuberculosis in the Province. In the previous year there were 6 deaths.

TUBERCULOSIS INCIDENCE

The number of new active cases of tuberculosis discovered in the Province tends to fluctuate from year to year but the overall trend has been downward. In 1964 there were 168 new active cases. In 1968 there were 206. In 1970 there were 130. In 1973 there were 98 and in 1974 there were 87. Table 6 gives new active cases and reactivations with rates by county. Table 7 gives new active cases by age and diagnosis.

CASE FINDING PROGRAM

In order to detect new active cases and reactivations a constant search must be maintained by the Health Unit Staffs and Hospitals. The Nova Scotia Tuberculosis and Respiratory Disease Association cooperates with the Department of Public Health in conducting tuberculin test surveys, sponsoring a chest x-ray clinic in the City of Halifax, providing Tine tests free of charge to all physicians in the Province and making educational materials available throughout the Province.

With regard to the methods of detection of 87 new active cases the great majority were discovered in general hospitals and by private physicians.

POLIOMYELITIS

Polio vaccine (salk) became available in 1955 and by 1962 the disease was eradicated from the Province. There have been no cases in the Province since 1962.

In Nova Scotia we continue to depend wholly on salk vaccine for the prevention of poliomyelitis and we have not used sabin oral vaccine since 1962. At that time we had a case of paralytic polio which was attributed to the oral vaccine. We do take one extra precaution, however, in that we take samples of sewage in various parts of the Province during the year and have them examined in our laboratory for polio virus. Should cases of polio occur in the Province we could quickly bring in oral polio vaccine and vaccinate the population in the area concerned.

OTHER COMMUNICABLE DISEASES

Table 16 gives the reported cases of communicable diseases and deaths for the years 1973 and 1974.

Measles and German Measles were made reportable diseases in 1969 when vaccination against measles began in the Province. Vaccination against German Measles began in 1970. During the year 1974 there were 1,300 cases of measles and 819 cases of German Measles reported as against 780 and 205 respectively in the previous year.

There were 84 cases of infectious hepatitis and 2 cases of serum hepatitis reported in 1974. In 1973 the numbers were 123 and 17 respectively.

During the winter months of 1974 there was the usual increase in the number of cases of influenza reported.

There were 16 cases of meningococcal meningitis reported during 1974 with no deaths. In 1973 there were 16 cases and two (2) deaths.

This mysterious disease continues to baffle the medical profession including epidemiologists. It is common throughout the world in both temperate and tropical climates. There are no limits to its geographical distribution. In recent years in Nova Scotia we have had sporadic cases throughout the Province, and the occasional death.

In October 1974 eighteen elderly inmates of Northwood Manor in Halifax decided to have a party and they made their own sandwiches using the facilities of the institution.

All became severely ill with symptoms of staphylococcal food poisoning in 3 - 6 hours. Samples of the food were obtained and the laboratory reports confirmed that it was staph. food poisoning.

One person died.

The sandwiches were made in a passage way and the refrigerator temperature was 60°F.

VENEREAL DISEASE

The Venereal Disease Clinic at the Victoria General Hospital was discontinued as such in 1969 but the Hospital continues to treat cases in the outpatient department. Table 14 gives patients treated in 1974 compared with the previous year.

Table 15 gives the total number of cases of Venereal Diseases from all sources for the whole Province for 1974 and 1973. Table 15 is obtained by adding up the number of cases in the annual reports of the eight Health Units. The total for the year 1974 was 1,138. In 1973 the total number was 1,122.

IMMUNIZATION

Immunization against smallpox, diphtheria, whooping cough, poliomyelitis, tetanus, measles and german measles were carried out as usual in our public clinics during the year. Vaccines were provided free of charge to private physicians for use in their office for immunizing against all these diseases except measles and german measles.

In 1972 Public Health Nurses were given permission to carry out immunization procedures themselves and many of them started to do so. This should greatly cut down cost of immunization and also save the public from waiting at the clinics for the doctor to arrive. It should also provide more complete recording of immunization in the Province.

Gamma Globulin was provided by the Department of Public Health free of charge to physicians for the prevention of German Measles in pregnant women, the prevention of measles in certain contacts, the prevention of infectious hepatitis in certain contacts and the prevention of infection in young children with hypogammaglobulinemia. In the year 1974, 600 packages were dis' buted at a cost of $2,544.00. In the previous year 3,800 vials were distributed at a cost of $7,410.00.

We should be distributing less gamma globulin each year as measles and german measles vaccines become more widely used.

The following materials were purchased for distribution to the health units for use in their clinics and for distribution to physicians:

3,100 pkgs.	of Smallpox Vaccine at	$ 6,655.50
6,625 pkgs.	D.P.T. Polio Vaccine at	39,881.25
8,960 pkgs.	D.T. Polio Vaccine at	22,440.00
1,970 pkgs.	Tetanus & Polio Vaccine at	4,219.50
703 pkgs.	Typhoid & Paratyphoid Vaccine at	899.82
150 pkgs.	Diphtheria Toxoid Schick Test at	234.00
200 pkgs.	Diphtheria Toxoid at	267.00
420 pkgs.	Tetanus Toxoid at	554.40
600 pkgs.	Gamma Globulin at	2,544.00
42 doses	of Rabies Vaccine at	94.50
6,500 pkgs.	MR Vaccine at	29,809.00
	TOTAL	$ 107,665.52

TABLE I

TUBERCULOSIS DEATHS - ALL FORMS

NOVA SCOTIA, 1910 - 1974

YEAR*	NUMBER	RATE**	YEAR*	NUMBER	RATE **
1910	1,102	207.6	1950	176	27.7
1911-15	0	178.0	1951	126	19.6
1921	702	134.0	1952	94	14.4
1926	665	129.1	1953	72	10.9
1927	658	127.8	1954	76	11.3
1928	578	112.3	1955	48	7.0
1929	534	103.7	1956	44	6.3
1930	552	107.4	1957	45	6.4
1931	524	102.2	1958	36	5.1
1932	518	100.0	1959	28	3.9
1933	478	91.0	1960	33	4.6
1934	467	88.0	1961	28	3.8
1935	488	91.0	1962	28	3.8
1936	485	89.0	1963	28	3.7
1937	461	84.0	1964	29	3.8
1938	415	74.8	1965	26	3.4
1939	428	76.3	1966	20	2.6
1940	415	72.8	1967	33	4.3
1941	429	74.2	1968	27	3.5
1942	379	64.1	1969	24	3.1
1943	417	64.8	1970	22	2.9
1944	357	58.4	1971	16	2.1
1945	388	54.6	1972	8	1.0
1946	382	62.6	1973	6	0.7
1947	309	50.2	1974	7	0.9
1948	247	39.5			
1949	184	29.3			

* Calendar Year
** Rates per 100,000 population

TABLE 2

TUBERCULOSIS DEATHS BY COUNTIES OF RESIDENCE

NOVA SCOTIA

1972 - 1973 - 1974

COUNTY	ALL FORMS			NON-RESPIRATORY		
	1972	1973	1974	1972	1973	1974
Annapolis	1	0	1	0	0	0
Antigonish	0	0	0	0	0	0
Cape Breton	1	1	2	0	0	0
Colchester	0	0	1	0	0	0
Cumberland	1	0	0	0	0	0
Digby	1	1	0	0	0	0
Guysborough	0	0	0	0	0	0
Halifax	3	1	2	1	0	0
Hants	1	0	0	0	0	0
Inverness	0	0	0	0	0	0
Kings	0	1	1	0	0	0
Lunenburg	0	0	0	0	0	0
Pictou	0	1	0	0	0	0
Queens	0	1	0	0	0	0
Richmond	0	0	0	0	0	0
Shelburne	0	0	0	0	0	0
Victoria	0	0	0	0	0	0
Yarmouth	0	0	0	0	0	0
Nova Scotia	8	6	7	1	0	0
Rate per 100,000	1.0	0.7	.9	0.1	0	0

TABLE 3

TUBERCULOSIS DEATHS - ALL FORMS
BY LOCATION AT TIME OF DEATH
NOVA SCOTIA, 1969 - 1974

	1969		1970		1971		1972		1973		1974	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
At home	0	0	5	23	4	25.0	1	12.5	1	16.7	1	14.2
General Hos.	9	37	6	27	6	37.5	2	25.0	1	16.7	3	42.9
Tuberculosis Inst.	15	63	11	50	6	37.5	5	62.5	4	66.6	3	42.9
Died in another Province	0	0	0	0	0	0	0	0	0	0	0	0
ALL DEATHS	24	100	22	100	16	100	8	100	6	100	7	100

TABLE 4

TUBERCULOSIS DEATHS - ALL FORMS - BY AGE AND Sex
NOVA SCOTIA - 1974

AGE GROUP	MALE	FEMALE	BOTH SEXES	PERCENTAGE OF TOTAL DEATHS
Under 2 years	0	0	0	0
2-4 years	0	0	0	0
5-9 years	0	0	0	0
10-14 years	0	0	0	0
15-19 years	0	0	0	0
20-29 years	0	0	0	0
30-39 years	0	0	0	0
40-49 years	0	0	0	0
50-59 years	0	0	0	0
60-69 years	3	1	4	57.1
70+	2	1	3	42.9
All Ages	5	2	7	100.0

TABLE 5

NEWLY DISCOVERED ACTIVE CASES OF TUBERCULOSIS

AND REACTIVATIONS OF DISEASE

NOVA SCOTIA, 1964 - 1974

	1964	1965	1966	1967	1968	1969	1970	1971	1972	1973	1974
All forms	168	201	217	174	206	165	130	144	122	98	87
(a) Respiratory	137	170	179	140	170	132	96	129	100	81	76
(b) Non-Respiratory	31	31	38	34	36	33	34	15	22	17	11
Reactivation of old cases from Inactive to active	55	56	58	52	48	43	26	23	21	13	11
Total number of cases to undertake treatment	223	257	275	226	254	208	156	167	143	111	98

TABLE 6

NEW ACTIVE CASES OF TUBERCULOSIS AND REACTIVATIONS
WITH RATES BY COUNTIES, NOVA SCOTIA 1974

COUNTY	1974 Population (estimated)	NEW ACTIVE CASES		REACTIVATIONS		TOTAL REQUIRING TREATMENT	
		No.	Rate*	No.	Rate*	No.	Rate*
Annapolis	22,000	5	22.7	0	0	5	22.7
Antigonish	17,969	3	16.7	1	5.6	4	22.2
Cape Breton	128,778	24	18.6	0	0	24	18.6
Colchester	38,956	10	25.6	1	2.6	11	27.5
Cumberland	34,698	4	11.5	0	0	4	11.5
Digby	20,661	1	9.3	0	0	1	4.8
Guysborough	12,885	1	7.6	1	7.8	2	15.5
Halifax	271,367	16	5.9	1	.37	17	6.2
Hants	30,159	2	6.2	0	0	2	6.6
Inverness	21,707	2	9.2	1	4.6	3	13.6
Kings	46,010	5	10.9	0	0	5	10.8
Lunenburg	39,805	0	0	1	2.5	1	2.5
Pictou	47,073	7	14.9	2	4.2	9	19.1
Queens	13,034	0	0	0	0	0	0
Richmond	13,643	3	22.1	0	0	3	21.4
Shelburne	16,886	2	11.8	2	11.8	4	23.5
Victoria	7,718	1	13.0	0	0	1	1.3
Yarmouth	25,360	1	4.0	1	3.9	2	7.9
TOTAL	808,709	87	11.0	11	1.4	98	12.1

*Rate per 100,000 estimated population

TABLE 7

NEWLY DISCOVERED ACTIVE CASES OF TUBERCULOSIS - ALL FORMS BY

FIVE AND TEN YEAR AGE GROUPS AND DIAGNOSIS

NOVA SCOTIA - 1974

	Age U.K.	0-4	5-9	10-14	15-19	20-29	30-39	40-49	50-59	60-69	70+	All Ages
With occupational disease of lung	0	0	0	0	0	0	0	0	0	0	0	0
Minimal	0	0	0	1	0	4	1	1	2	4	3	16
Moderately advanced	0	0	1	0	0	5	3	4	3	4	7	24
Far advanced	0	0	0	0	0	1	2	2	3	4	5	17
Miliary	0	0	0	0	0	0	0	0	0	0	0	0
Unspecified	0	0	0	0	0	0	0	0	0	0	0	0
Pleural Tuberculosis	0	0	0	0	0	0	0	0	0	0	0	0
Primary Infection	0	3	6	1	0	2	0	1	0	0	0	13
Other Respiratory Tuberculosis	0	1	0	1	0	0	1	0	0	0	0	3
Subtotal All Respiratory Tuberculosis	0	4	7	3	0	12	7	8	8	12	15	76
Tuberculosis of meninges and C.N.S.	0	0	0	0	0	0	0	0	0	0	0	0
Tuberculosis on Intestines, Peritoneum and mesenteric glands	0	0	0	0	0	0	0	0	0	0	0	0
Tuberculosis of bones and joints	0	0	0	0	0	0	1	0	0	1	1	3
Tuberculosis of genito-urinary system	0	0	0	0	0	1	1	1	1	1	1	6
Tuberculosis of other organs												
(a) of skin & subcutaneous cellular tissue	0	0	0	0	0	0	0	0	0	0	0	0
(b) of peripheral lymphatic glands	0	0	0	0	0	0	0	0	0	0	1	1
(c) all other organs	0	0	0	0	0	0	0	0	0	0	0	0
Other or unspecified	0	0	1	0	0	0	0	0	0	0	0	1
ALL DIAGNOSIS	0	4	8	3	0	13	9	9	9	14	18	87

TABLE 7(b)

REACTIVATIONS OF KNOWN CASES OF INACTIVE TUBERCULOSIS - ALL FORMS

BY FIVE AND TEN YEAR AGE GROUPS AND DIAGNOSIS

NOVA SCOTIA - 1974

	Age U.K.	0-4	5-9	10-14	15-19	20-29	30-39	40-49	50-59	60-69	70+	All ages
With Occupational disease of lung	0	0	0	0	0	0	0	0	0	0	0	0
Minimal	0	0	0	0	0	0	0	0	0	0	0	0
Moderately advanced	0	0	0	0	0	0	0	0	1	3	0	4
Far Advanced	0	0	0	0	0	0	0	0	2	1	2	5
Pleural tuberculosis	0	0	0	0	0	0	0	0	0	0	0	0
Subtotal of all Respiratory tuberculosis	0	0	0	0	0	0	0	0	3	4	2	9
Tuberculosis of bones & joints	0	0	0	0	0	0	0	0	0	0	0	0
Tuberculosis of genito-urinary system	0	0	0	0	0	0	0	1	0	0	1	2
Tuberculosis of lymphatic system	0	0	0	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0	0	0	0	0
ALL DIAGNOSIS	0	0	0	0	0	0	0	1	3	4	3	11

TABLE 8

DISPOSITION OF NEW ACTIVE CASES OF TUBERCULOSIS

BY DIAGNOSIS - 1974

DISPOSITION	OTHER RESP. AND UNDIAG.		PULMONARY TUBERCULOSIS		PLEURAL TUBERCULOSIS		NON-RESP. TUBERCULOSIS		ALL CASES	
	No.	%	No.	%	No.	%	No.	%	No.	%
Admitted to tuberculosis institution	0	0	37	50.0	0	0	2	18.0	39	45.0
Started on drug treatment at home	2	100.0	36	49.0	0	0	9	82.0	47	54.0
Notified and diagnosed only after death	0	0	1	1.0	0	0	0	0	1	1.0
Left Province for treatment elsewhere	0	0	0	0	0	0	0	0	0	0
No treatment reported	0	0	0	0	0	0	0	0	0	0
ALL CASES	2	100.0	74	100.0	0	0	11	100.0	87	100.0

TABLE 8(b)

DISPOSITION OF REACTIVATED CASES OF TUBERCULOSIS

BY DIAGNOSIS - 1974

DISPOSITION	OTHER RESP. AND UNDIAG.		PULMONARY TUBERCULOSIS		PLEURAL TUBERCULOSIS		NON-RESP. TUBERCULOSIS		ALL CASES	
	No.	%	No.	%	No.	%	No.	%	No.	%
Admitted to tuberculosis institution	0	0	6	66.7	0	0	0	0	6	54.5
Started on drug treatment at home	0	0	3	33.3	0	0	2	100.0	5	45.5
Notified and diagnosed only after death	0	0	0	0	0	0	0	0	0	0
Left Province for treatment elsewhere	0	0	0	0	0	0	0	0	0	0
No treatment reported	0	0	0	0	0	0	0	0	0	0
ALL CASES	0	0	9	100.0	0	0	2	100.0	11	100.0

TABLE 9

THE RATIO OF NEWLY DISCOVERED ACTIVE CASES OF TUBERCULOSIS IN CANADA AND THE PROVINCES OF CANADA PER 100,000 POPULATION

1973 - 1974

	1973*		1974**	
	No. new active cases reported	Rates per 100,000 pop.	No. new active cases reported	rates per 100,000 pop.
Canada	3,563	16.1	3,354	14.9
Newfoundland	166	30.7	145	26.7
Nova Scotia	100	12.4	87	10.7
Prince Edward Island	9	7.8	13	11.1
New Brunswick	72	11.0	85	12.8
Quebec	1,121	18.4	934	15.2
Ontario	1,000	12.6	979	12.1
Saskatchewan	171	18.8	148	16.3
Manitoba	219	21.9	261	25.8
Alberta	269	16.0	249	14.5
British Columbia	294	17.0	395	16.5
Yukon	3	15.2	6	30.9
North West Territories	39	103.2	52	138.7

* Final figures for 1973

** The number of new active cases are preliminary figures for 1974 as provided by Statistics Canada, Ottawa, at the time of compiling this table. It is probable that these figures may change when all Provinces finalize their reporting.

TABLE 10

HEAF, TINE AND MANTOUX TUBERCULIN TESTS
OTHER THAN THOSE DONE BY PRIVATE PHYSICIANS
NOVA SCOTIA 1974

HEALTH UNIT	TESTS PERFORMED IN SURVEY			OTHER TESTS (NOT IN SURVEYS)			TOTAL TESTS PERFORMED
	HEAF	TINE	MANTOUX	HEAF	TINE	MANTOUX	
Atlantic	No breakdown available						58,161
C.B. North	13,336	43	0	141	300	62	13,882
C.B. South	15,317	190	0	59	395	9	15,970
Cobequid	830	351	0	0	576	40	1,797
Fundy	11,134	0	0	0	222	58	11,414
Lun-Queens	No breakdown available						13,163
Northumberland	3,259	0	0	1,169	278	0	4,706
Western	No breakdown available						3,074
NOVA SCOTIA	43,876	584	0	1,369	1,771	169	122,167

TABLE 11

B.C.G. VACCINATION

NOVA SCOTIA 1968 - 1974

	1968	1969	1970	1971	1972	1973	1974
Nurses (a) Graduate	43	24	48	21	17	14	14
(b) Student	366	484	390	437	356	373	296
(c) Others	250	274	223	127	59	57	201
Other Hospital Personnel	332	322	308	294	286	262	325
Medical Students	83	106	101	91	95	92	97
Eskimos and Indians							
(a) Newborn	0	52	25	0	0	0	0
(b) Adults & Children	305	0	0	0	0	0	0
Others (a) Newborn contacts	0	1	4	0	0	0	0
(b) adults & children contacts	5	3	3	4	2	3	0
(c) newborn not contacts	0	0	0	0	0	0	0
(d) adults & children not contacts	7	13	23	23	13	13	16
TOTAL	1,391	1,391	1,125	997	828	814	949

TABLE 12

B.C.G. VACCINATIONS - BY HEALTH UNITS

NOVA SCOTIA - 1974

	ATLANTIC	C.B.NORTH	C.B.SOUTH	COBEQUID	FUNDY	LUN-QUEENS	NORTH-UMBER-LAND	WESTERN	ALL HEALTH UNITS
Nurses (a) Graduates	13	0	0	0	1	0	0	0	14
(b) Students	123	46	0	0	0	0	76	51	296
(c) Other	172	0	21	0	8	0	0	0	201
Other Hospital Personnel	320	0	0	0	5	0	0	0	325
Medical Students	97	0	0	0	0	0	0	0	97
Eskimos and Indians									
(a) newborn	0	0	0	0	0	0	0	0	0
(b) adults & children	0	0	0	0	0	0	0	0	0
All Others									
(a) newborn contacts	0	0	0	0	0	0	0	0	0
(b) adults & children contacts	0	0	0	0	0	0	0	0	0
(c) newborn not contacts	0	0	0	0	0	0	0	0	0
(d) adults & children Not contacts	11	0	0	0	5	0	0	0	16
TOTAL	736	46	21	0	19	0	76	51	949

TABLE 13

PARALYTIC POLIOMYELITIS INCIDENCE
AND DEATHS

1959 - 1974

YEAR	PARALYTIC CASES	TOTAL DEATHS	YEAR	PARALYTIC CASES	TOTAL DEATHS
1959	9	0	1967	0	0
1960	9	1	1968	0	0
1961	1	2*	1969	0	0
1962	1	0	1970	0	0
1963	0	0	1971	0	0
1964	0	0	1972	0	0
1965	0	0	1973	0	0
1966	0	0	1974	0	0

* One death was a case which occurred in a previous year.

TABLE 14

VENEREAL DISEASE CLINIC
VICTORIA GENERAL HOSPITAL
(YEAR ENDING DECEMBER 31, 1974)

New Cases Seen 190

Total Cases Seen 212

BREAKDOWN OF CASES

	NEW	RETURN	TOTAL	TOTAL 197
Syphilis	18	5	23	22
Gonorrhea	172	17	189	209
			212	231

TABLE 15

NEWLY DISCOVERED CASES OF VENEREAL DISEASE
ALL HEALTH UNITS

1974

HEALTH UNIT	OFFICIALLY REPORTED ON N.H.I CARDS		TOTAL NEW CASES FOUND		TOTAL ALL CASES	
	V.D.S.	V.D.G.	V.D.S.	V.D.G.	1974	1973
Atlantic	15	405	29	712	741	789
C.B. North	0	4	6	4	10	21
C.B. South	0	2	2	7	9	11
Cobequid	1	6	6	70	76	57
Fundy	1	31	3	116	119	88
Lunenburg-Queens	0	3	6	45	51	44
Northumberland	0	7	18	33	51	66
Western	0	3	25	56	81	46
TOTAL	17	461	95	1,043	1,138	1,122

TABLE 16

CASES OF COMMUNICABLE DISEASE AND DEATHS BY YEAR
ALL HEALTH UNITS, 1973 and 1974

	1973		1974	
	CASES	DEATHS	CASES	DEATHS
Intestinal Infections				
Typhoid Fever	1	0	0	0
Paratyphoid Fever	1	0	4	0
Other Salmonella Infections				
with food as vehicle	0	0	0	0
without food as vehicle	0	0	84	0
Bacillary dysentery	9	0	0	0
Food poisoning (bacterial)(excludes Salmonella food poisoning)				
Staphylococcal	9	0	76	0
Botulism	0	0	0	0
Other	0	0	15	0
Diarrhoea of the newborn, epid.	162	0	4	0
Venereal Diseases:				
Gonococcal Infections-Genito-urinary	996	0	1,041	0
Gonococcal infection of eye	0	0	0	0
Other	42	0	0	0
Syphilis:				
Congenital	0	0	1	0
Acquired	0	0	0	0
Early syphilis symptomatic				
Primary	12	0	23	0
Secondary	0	0	0	0
Late syphilis				
Cardiovasculary syphilis	0	0	0	0
Syphilis of central nervous system	0	0	0	0
Other & not specified	62	0	72	0
Other Bacterial Diseases				
Diphtheria	0	0	0	0
Meningococcal infections	16	2	16	0
Streptococcal sore throat & scarlet fever	1,513	0	1,908	0
Whooping cough	48	0	163	0
Virus Diseases of Central Nervous System Aseptic Meningitis due to enteroviruses (excludes polio)				
Coxsackie Virus	0	0	0	0
ECHO Virus	0	0	0	0
Not specified	13	0	20	0
Western equine encephalitis	0	0	0	0
Other Virus Diseases				
Hepatitis infectious	224	1	84	0
Hepatitis serum	0	0	2	0
Measles	780	0	1,300	0
Rubella	205	0	819	0

TABLE 17

NUMBER AND PERCENT OF CHILDREN BEGINNING SCHOOL
WHO ARE IMMUNIZED* AGAINST CERTAIN COMMUNICABLE DISEASES
BY MUNICIPALITY

1974

HEALTH UNIT	POPULATION	DIPHTHERIA, TETANUS* PERTUSSIS & POLIO		MEASLES		GERMAN MEASLES	
		NO.	%	NO.	%	NO.	%
Atlantic	4,793	3,973	83	2,169	45	1,690	35
Northumberland	1,525	1,338	87.7	1,310	85.9	1,310	85.9
Lunenburg-Queens	827	741	89.6	676	81.7	548	66
Fundy	1,697	1,544	91.0	1,218	71.7	1,218	71.7
Western	1,078	846	78.5	732	70.7	515	51
Cape Breton South	1,779	1,623	90.6	1,337	75.7	1,337	75.2
Cape Breton North	1,395	1,147	82.2	782	56	503	36
Cobequid	1,318	1,209	91.7	1,148	87.9	1,030	78.1
TOTAL	14,412	12,421	86.2	9,372	65.0	8,151	56.6

* Combined measles vaccine

PART 111

SUPPLEMENTARY TABLES

SUPPLEMENTARY TABLE 1

SELECTED VITAL STATISTICS - CANADA AND PROVINCES

1973

		CANADA	NLFD.	P.E.I.	N.S.	N.B.	QUE.	ONT.	MAN.	SASK.	ALTA.	B.C.	YUKON	N.W.T.
Live Births	no.	343,373	11,906	1,886	13,289	11,425	84,057	123,776	16,964	14,806	29,288	34,352	420	1,204
	rate	15.5	22.0	16.4	16.5	17.5	13.8	15.6	17.0	16.3	17.4	14.8	21.3	31.9
Stillbirths*	no.	2,866	151	15	119	132	658	1,034	151	144	206	243	3	10
	rate	8.3	12.7	8.0	9.0	11.6	7.8	8.4	8.9	9.7	7.0	7.1	7.1	8.3
Maternal *** Deaths	no.	37	2	0	0	1	10	14	0	1	4	5	0	0
	rate	1.1	1.7	0	0	0.9	1.2	1.1	0	0.7	1.4	1.5	0	0
Infant Deaths	no.	5,339	230	30	206	173	1,378	1,740	278	261	416	575	7	45
	rate	15.5	19.3	15.9	15.5	15.1	16.4	14.1	16.4	17.6	14.2	16.7	16.7	37.4
Neonatal deaths	no.	3,692	164	19	135	122	995	1,238	169	180	266	380	4	20
	rate	10.8	13.8	10.1	10.2	10.7	11.8	10.0	10.0	12.2	9.1	11.1	9.5	16.6
Perinatal ** Deaths	no.	6,087	291	30	226	245	1,532	2,127	296	300	433	576	5	26
	rate	17.6	24.1	15.8	16.9	21.2	18.1	17.0	17.3	20.1	14.7	16.6	11.8	21.4

The 1974 figures for this table are not available at this time.

* Stillbirths - 28 weeks and over gestation.

** Perinatal Deaths - Stillbirths of 28 weeks and over plus early neonatal deaths (deaths in the first 7 days).

*** Maternal Deaths - per 10,000 live births.

Rate is on total live births.

These are preliminary figures published by D.B.S.

SUPPLEMENTARY TABLE #2

NUMBER OF DEATHS DUE TO CERTAIN COMMUNICABLE DISEASES IN NOVA SCOTIA

1940 - 1074

YEAR	WHOOPING COUGH	DIPHTHERIA	SCARLET FEVER	MEASLES	TYPHOID FEVER	POLIOMYELITIS	TUBERCULOSIS
1940	53	21	2	15	2	3	415
1941	15	53	9	65	1	4	429
1942	39	63	10	3	2	17	379
1943	13	56	5	5	2	1	417
1944	26	26	1	1	1	1	357
1945	27	17	2	1	0	1	388
1946	8	12	3	9	1	2	382
1947	77	13	1	14	2	7	309
1948	4	1	-	4	0	4	247
1949	8	1	11	23	3	13	184
1950	20	1	0	5	2	1	176
1951	8	1	0	0	0	23	126
1952	1	1	0	9	1	7	94
1953	6	1	0	2	0	6	72
1954	7	1	1	7	0	7	76
1955	3	0	0	5	0	1	48
1956	1	0	0	7	0	1	44
1957	2	1	1	3	1	0	45
1958	4	0	0	9	0	0	36
1959	2	0	2	3	0	0	28
1960	3	0	0	0	0	0	33
1961	1	0	0	1	0	2	28
1962	2	0	0	6	0	0	28
1963	0	0	0	2	0	0	27
1964	0	0	0	4	0	0	29
1965	0	0	0	2	0	0	26
1966	0	0	1	3	0	0	20
1967	0	0	0	0	0	0	33
1968	1	0	0	5	0	0	27
1969	0	0	0	0	0	0	23
1970	0	0	0	2	0	0	23
1971	0	0	0	0	0	0	17
1972	0	0	0	0	0	0	8
1973	0	0	0	0	0	0	6
1974	0	0	0	0	0	0	7